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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**Applicant(s):** Kiyoko Karusawa**Examiner:** Eugene Yun**Serial No.:** 09/782,905**Art Unit:** 2682**Filed:** February 14, 2001**Docket:** 14318**For:** PORTABLE TELEPHONE
WITH ORIGINATOR
ACKNOWLEDGE FUNCTION**Dated:** February 19, 2004**Confirmation No.:** 3208Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**REQUEST FOR RECONSIDERATION UNDER 37 C.F.R. § 1.112**

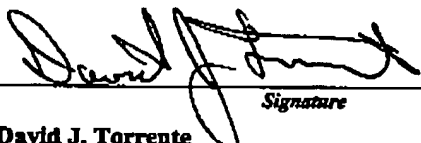
Sir:

This paper is responsive to the Office Action mailed 20 November 2003 in the above-captioned application. Favorable reconsideration and withdrawal of all rejections is kindly requested in light of the following remarks.

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Dated: February 19, 2004
David J. Torrente

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 14318	
Applicant(s): Kiyoko Karusawa					
Serial No. 09/782,905	Filing Date 2/14/2001	Examiner Eugene Yun		Group Art Unit 2682	
Invention: PORTABLE TELEPHONE WITH ORIGINATOR ACKNOWLEDGE FUNCTION					
TO THE COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	8 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-1013/SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 _____ Signature			Dated: February 19, 2004		
David J. Torrente Registration No. 49,099 Customer Number: 23389					
cc:					
<div style="border: 1px solid black; padding: 5px;"> <p>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p> <p style="text-align: center;">_____ Signature of Person Mailing Correspondence</p> <p style="text-align: center;">_____ Typed or Printed Name of Person Mailing Correspondence</p> </div>					

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To: Examiner Eugene yun
Group Art Unit: 2682

From: David J. Torrente

Fax: 703-872-9306

Pages: 9 including cover

Phone:

Date: 2/19/2004

Re: Kiyoko Karusawa
U.S. Patent Appin. No. 09/782,905
Our Docket: 14318

CC:

XX Urgent ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

Dear Sir:

The following is attached hereto:

1. Amendment Transmittal in duplicate
2. Request for Reconsideration under 37 CFR 1.112
3. Certificate of Facsimile in duplicate

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